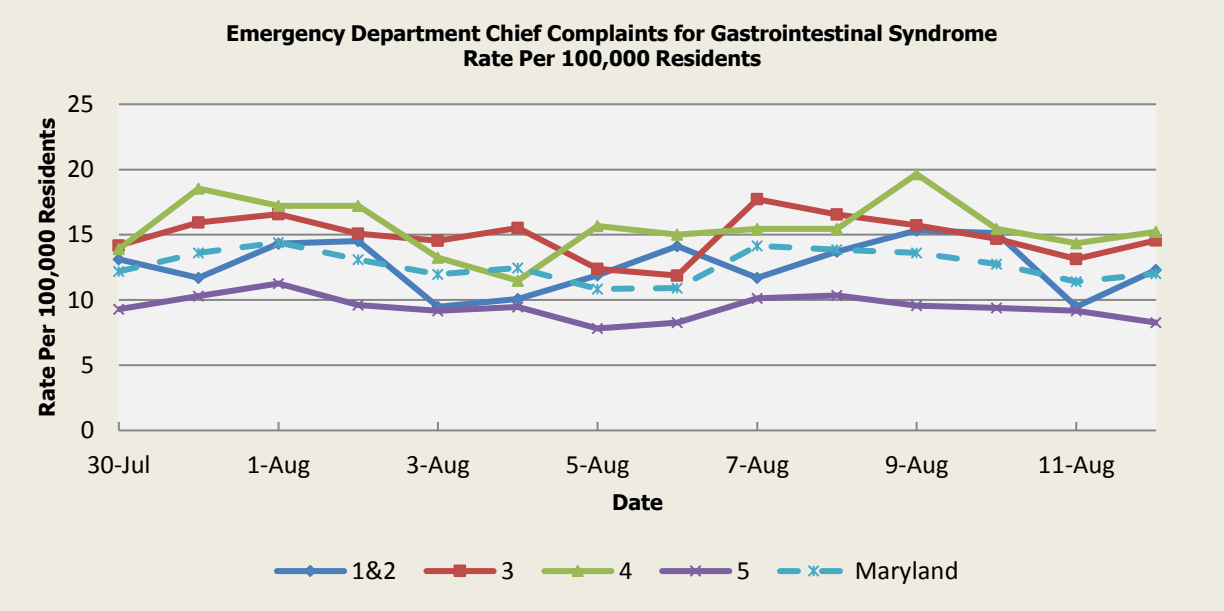
August 18, 2017

Public Health Preparedness and Situational Awareness Report: #2017:32
Reporting for the week ending 08/12/17 (MMWR Week #32)

CURRENT HOMELAND SECURITY THREAT LEVELS
National: **No Active Alerts**
Maryland: **Level Four (MEMA status)**

SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the "Other" category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2017.



There was one (1) Gastrointestinal Syndrome outbreak reported this week: one (1) outbreak of Gastroenteritis in a Nursing Home (Region 3).

	Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	12.42	14.54	14.85	9.91	12.61
Median Rate*	12.91	14.80	15.02	10.22	12.95

* Per 100,000 Residents

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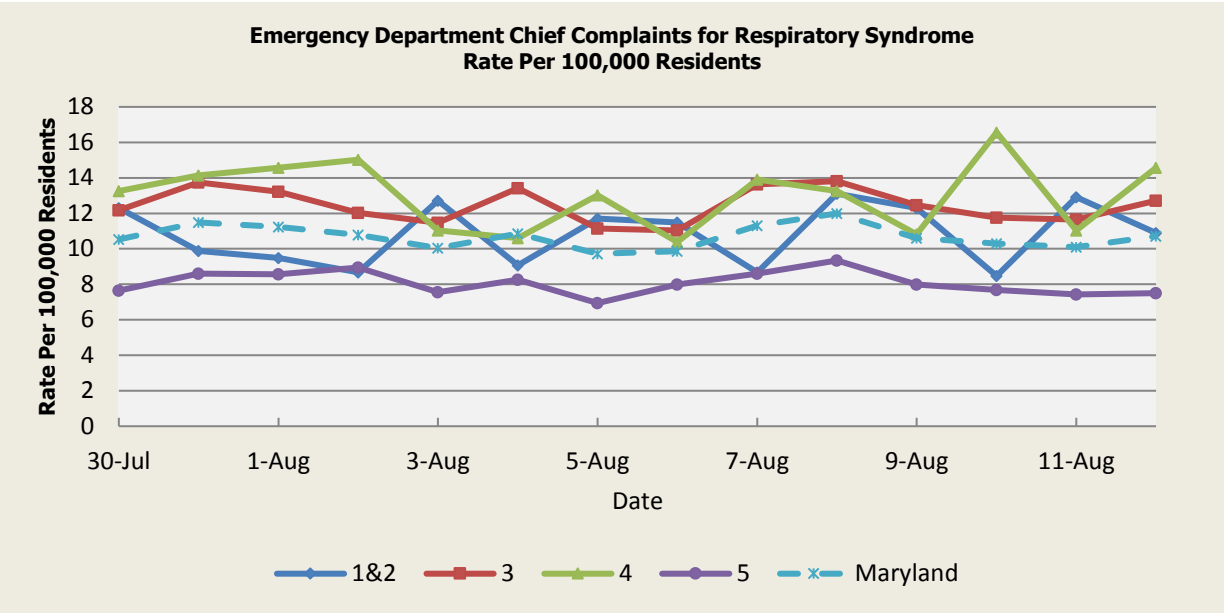
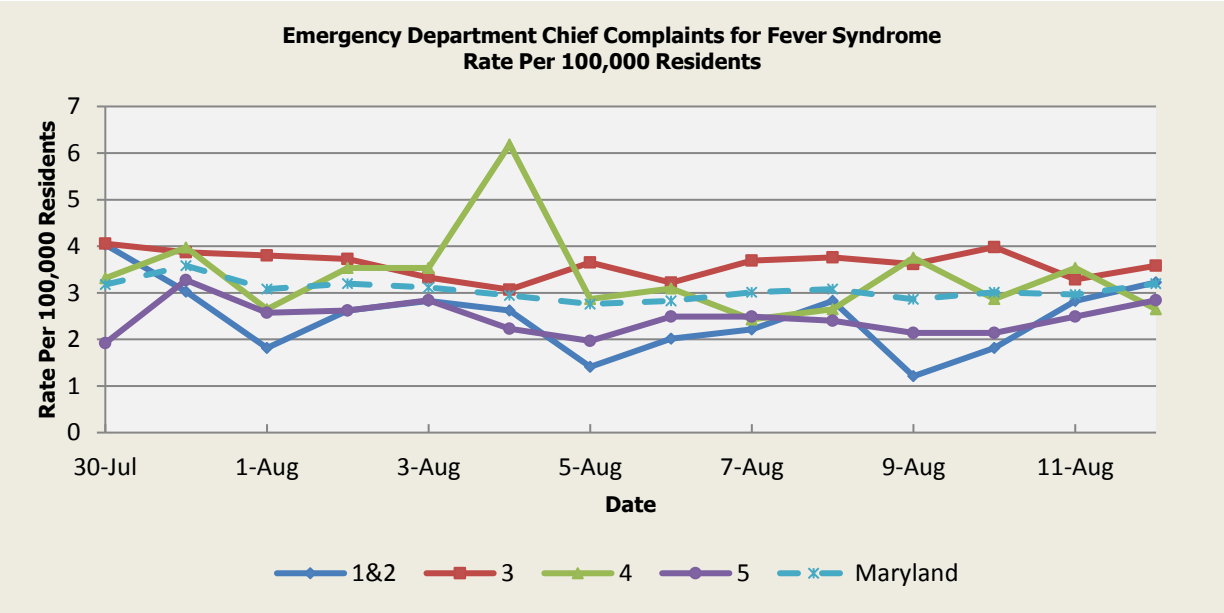


There were two (2) Respiratory Syndrome outbreaks reported this week: one (1) outbreak of Pneumonia in a Residential Center (Regions 1&2), and one (1) outbreak of Pneumonia in a Nursing Home (Region 3).

	Respiratory Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	11.60	13.91	13.81	9.59	12.05
Median Rate*	11.70	13.88	13.91	9.65	12.05

* Per 100,000 Residents



There were no Fever Syndrome outbreaks reported this week.

	Fever Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.91	3.73	3.83	2.97	3.38
Median Rate*	2.82	3.76	3.75	2.97	3.40

Per 100,000 Residents

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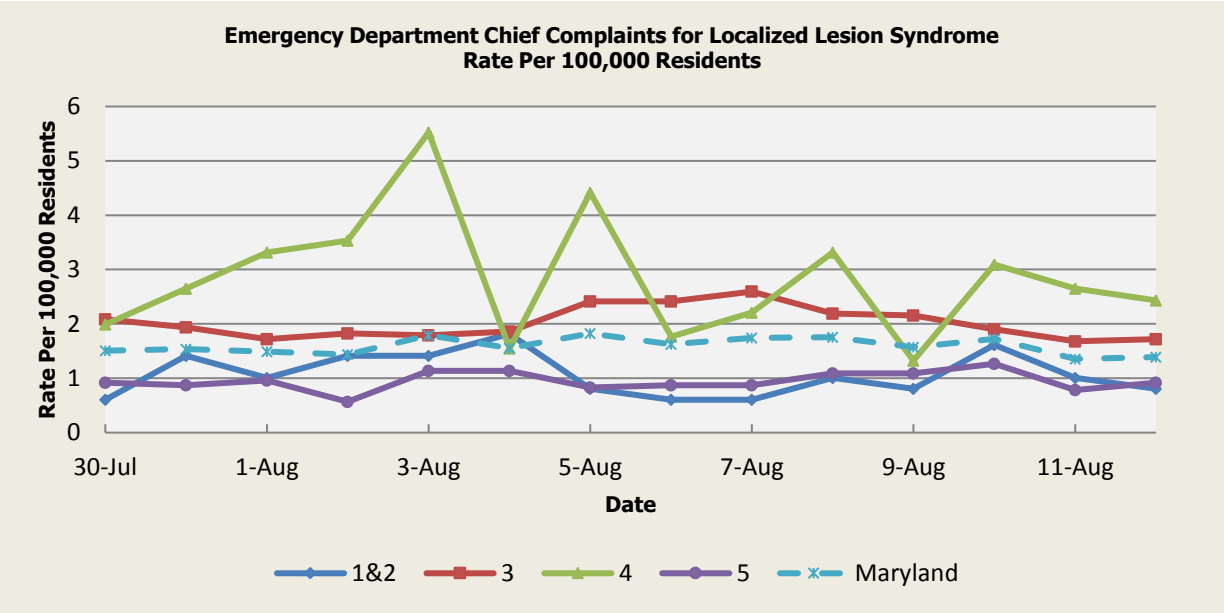
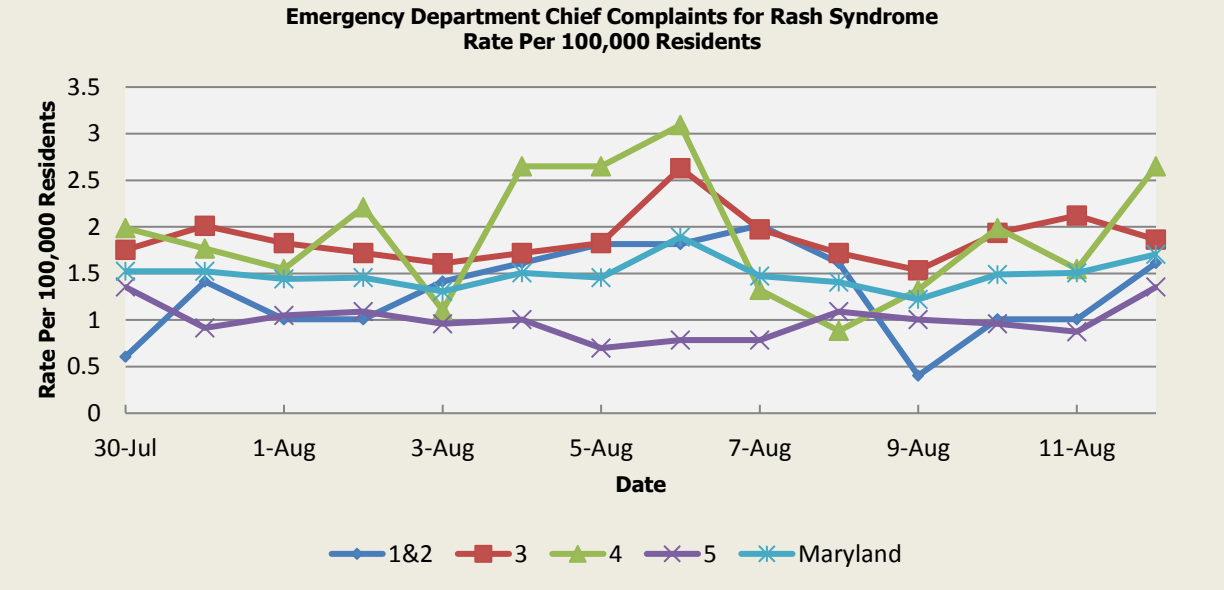


There were no Localized Lesion Syndrome outbreaks reported this week.

	Localized Lesion Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.00	1.82	1.95	0.92	1.42
Median Rate*	1.01	1.83	1.99	0.92	1.42

* Per 100,000 Residents



There were two (2) Rash Syndrome outbreaks reported this week: one (1) outbreak of Rash Illness associated with a Daycare Center (Region 4), and one (1) outbreak of Hand, Foot, and Mouth Disease associated with a Daycare Center (Region 5).

	Rash Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.20	1.69	1.70	0.99	1.38
Median Rate*	1.21	1.68	1.77	1.00	1.39

* Per 100,000 Residents

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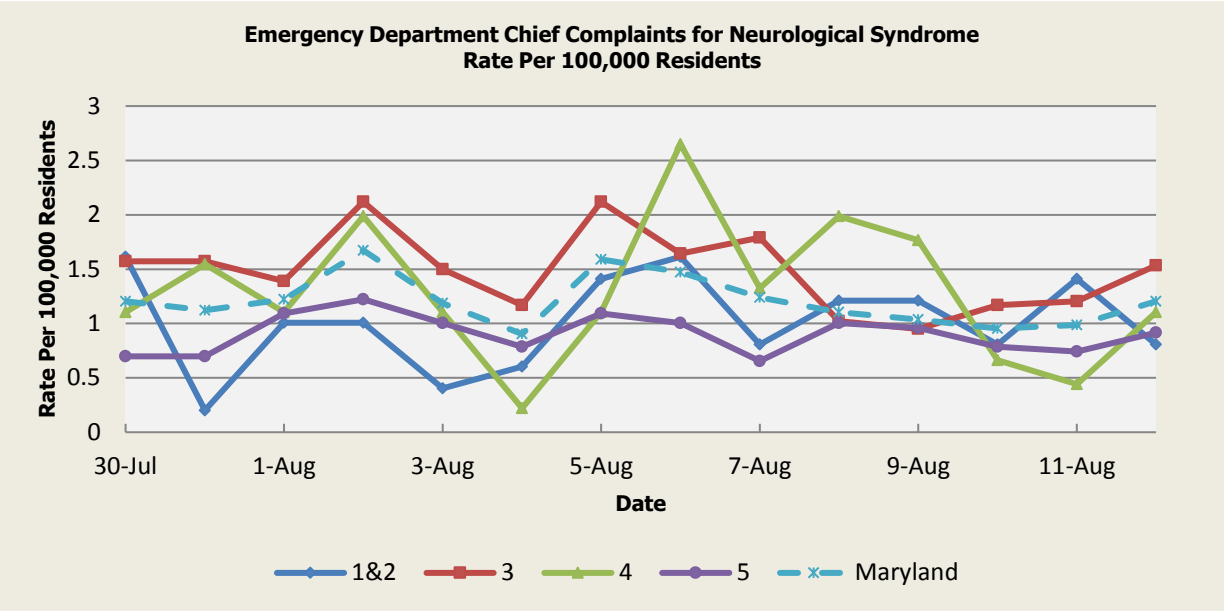
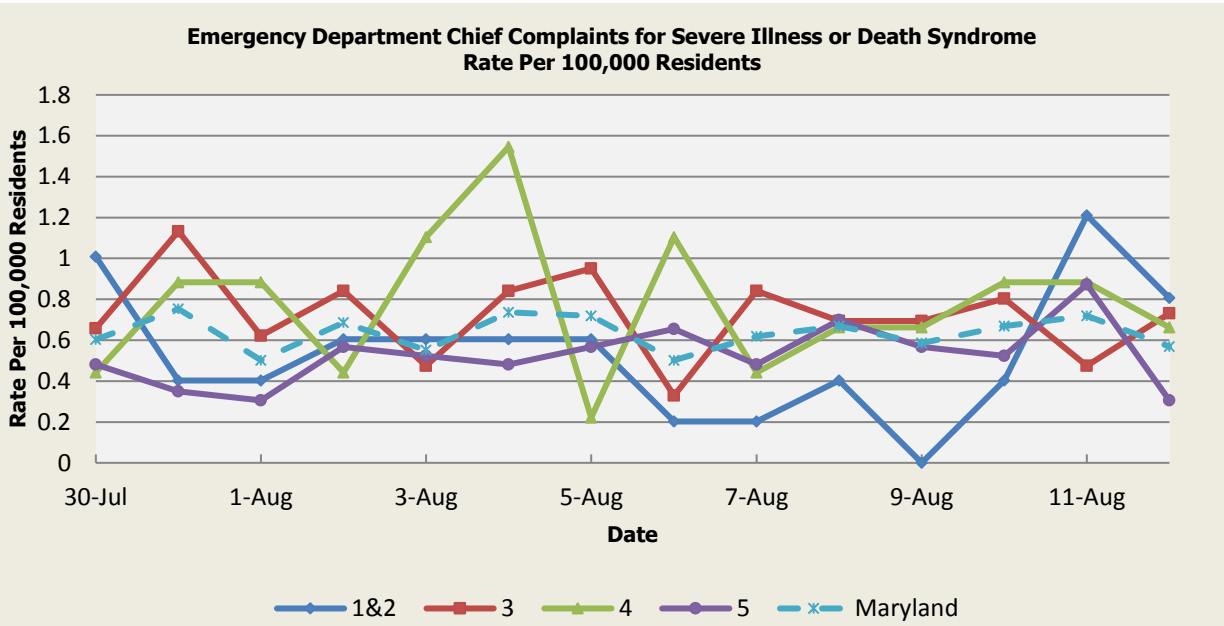


There were no Neurological Syndrome outbreaks reported this week.

	Neurological Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.63	0.77	0.66	0.49	0.64
Median Rate*	0.60	0.69	0.66	0.48	0.59

* Per 100,000 Residents



There were no Severe Illness or Death Syndrome outbreaks reported this week.

	Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.62	0.89	0.78	0.44	0.69
Median Rate*	0.60	0.91	0.66	0.44	0.70

* Per 100,000 Residents

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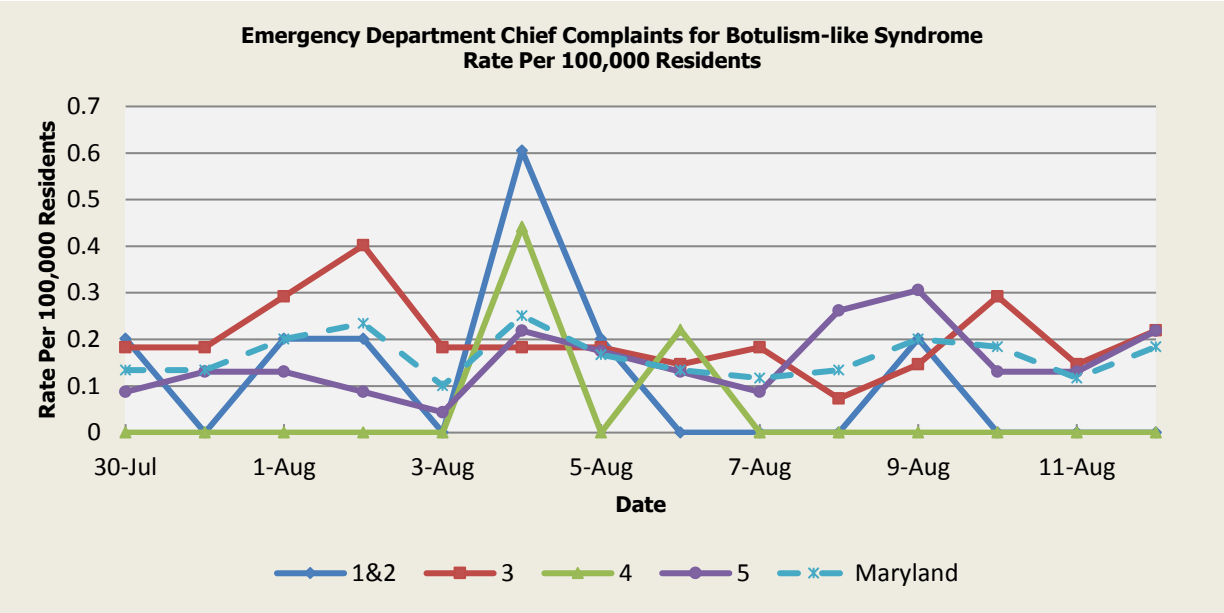
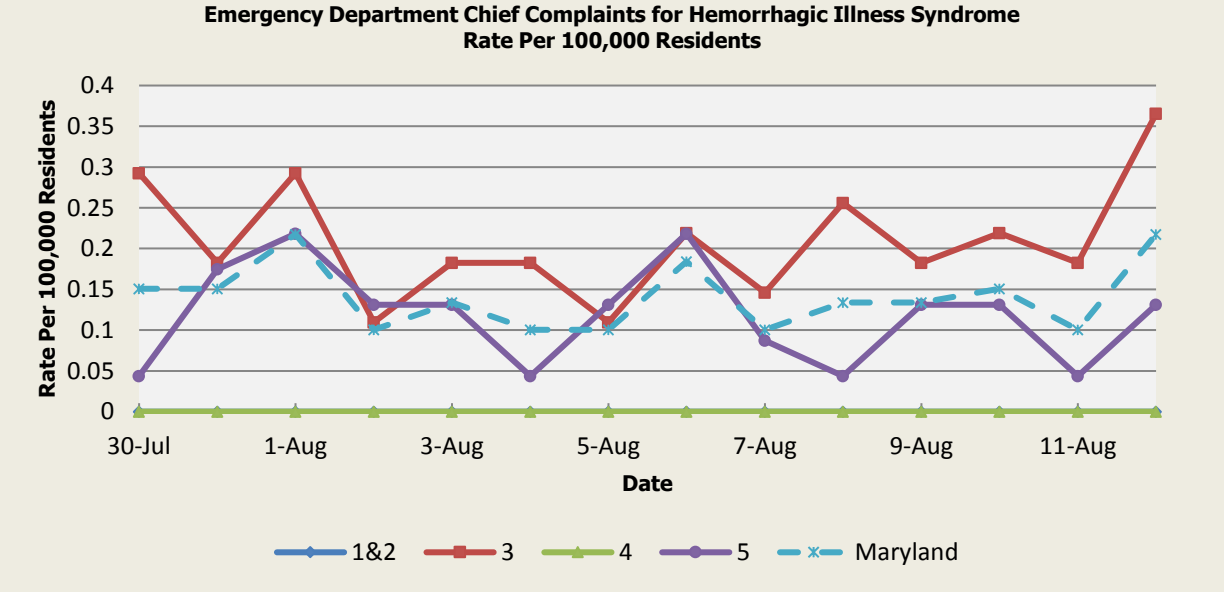
SYNDROMES RELATED TO CATEGORY A AGENTS



There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on 07/30 (Regions 1&2,3), 07/31 (Regions 3,5), 08/01 (Regions 1&2,3,5), 08/02 (Regions 1&2,3), 08/03 (Region 3), 08/04 (Regions 1&2,3,4,5), 08/05 (Regions 1&2,3,5), 08/06 (Regions 4,5), 08/07 (Region 3), 08/08 (Region 5), 08/09 (Regions 1&2,5), 08/10 (Regions 3,5), 08/11 (Region 5), 08/12 (Regions 3,5). These increases are not known to be associated with any outbreaks.

	Botulism-like Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.06	0.09	0.04	0.06	0.07
Median Rate*	0.00	0.07	0.00	0.04	0.05

* Per 100,000 Residents



There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on 07/30 (Region 3), 08/01 (Regions 3,5), 08/06 (Region 5), 08/08 (Region 3), 08/12 (Region 3). These increases are not known to be associated with any outbreaks.

	Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.03	0.12	0.03	0.09	0.10
Median Rate*	0.00	0.04	0.00	0.04	0.05

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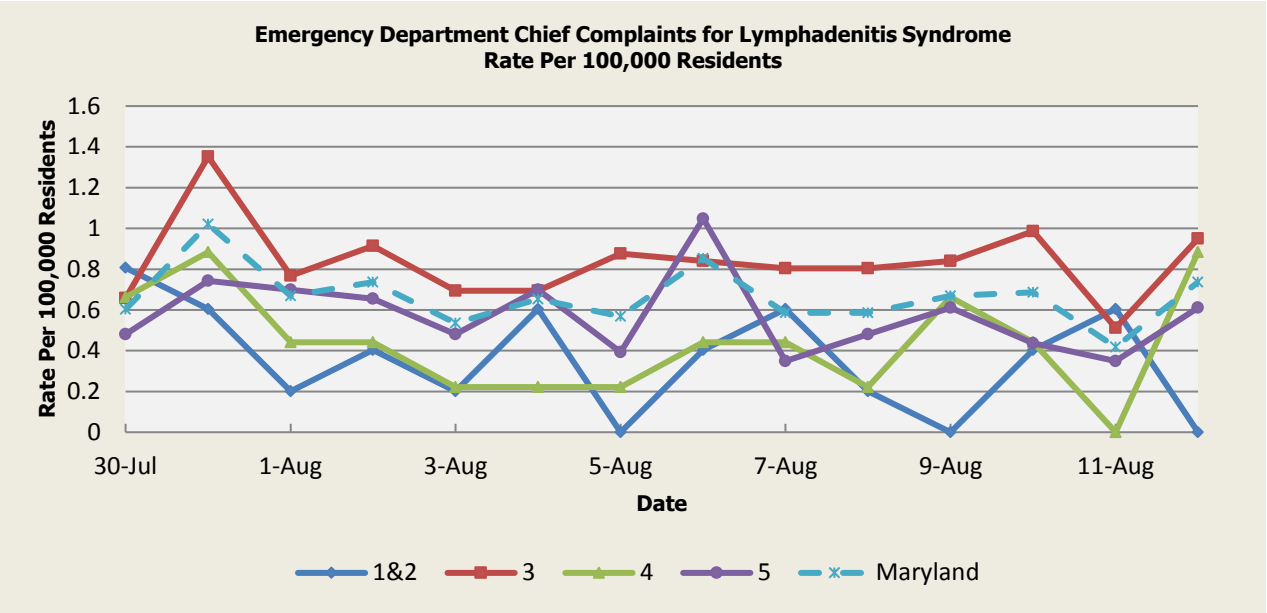

There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on 07/30 (Regions 1&2), 07/31 (Regions 1&2,3,4,5), 08/01 (Region 5), 08/02 (Region 5), 08/04 (Regions 1&2), 08/07 (Regions 1&2), 08/11 (Regions 1&2), 08/12 (Region 4). These increases are not known to be associated with any outbreaks.

	Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.30	0.51	0.34	0.31	0.40
Median Rate*	0.20	0.40	0.22	0.26	0.33

* Per 100,000 Residents

MARYLAND REPORTABLE DISEASE SURVEILLANCE

	Counts of Reported Cases‡					
Condition	August			Cumulative (Year to Date)**		
Vaccine-Preventable Diseases	**2017**	**Mean***	**Median***	**2017**	**Mean***	**Median***
Aseptic meningitis	14	21	18	206	264.2	242
Meningococcal disease	0	0	0	4	3.2	3
Measles	0	0.4	0	4	4.2	4
Mumps	1	1	1	23	35.8	14
Rubella	0	0.6	1	1	4.4	3
Pertussis	4	15	18	146	197.6	208
Foodborne Diseases	**2017**	**Mean***	**Median***	**2017**	**Mean***	**Median***
Salmonellosis	29	62.4	61	485	572	577
Shigellosis	7	9.8	10	160	129.4	154
Campylobacteriosis	18	38.6	39	511	495	504
Shiga toxin-producing Escherichia coli (STEC)	3	8.4	5	107	96.8	89
Listeriosis	1	1.2	1	16	10.2	10
Arboviral Diseases	**2017**	**Mean***	**Median***	**2017**	**Mean***	**Median***
West Nile Fever	1	1.6	1	3	5.4	6
Lyme Disease	124	142	140	2310	2044.8	1998
Emerging Infectious Diseases	**2017**	**Mean***	**Median***	**2017**	**Mean***	**Median***
Chikungunya	0	0.4	0	0	3.4	0
Dengue Fever	0	1.6	1	9	18	11
Zika Virus***	0	0.4	0	2	9.2	6
Other	**2017**	**Mean***	**Median***	**2017**	**Mean***	**Median***
Legionellosis	10	6	6	134	107.6	102

NEDSS data: Maryland National Electronic Disease Surveillance System (NEDSS). Baltimore, MD: Maryland Department of Health; 2017. ‡ Counts are subject to change *Timeframe of 2011-2017**Includes January through current month. *** As of August 17, 2017, the total Maryland Confirmed and Probable Cases of Zika Virus Disease and Infection for 2017 is 46.

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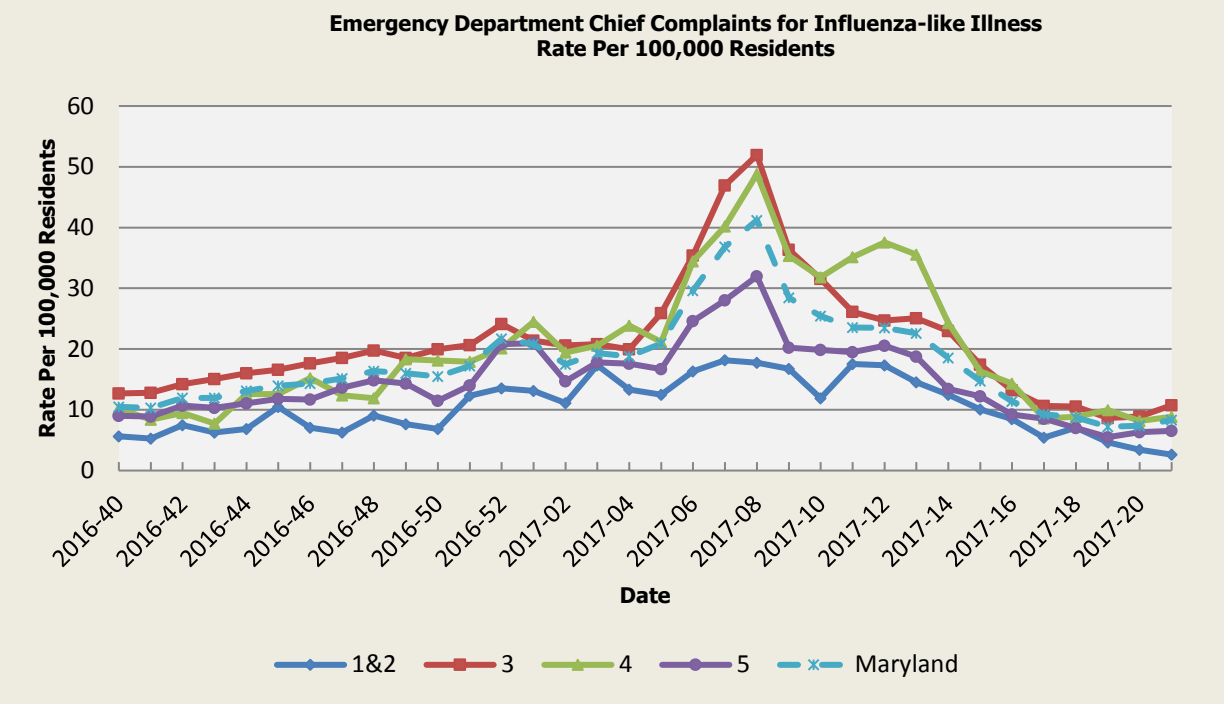
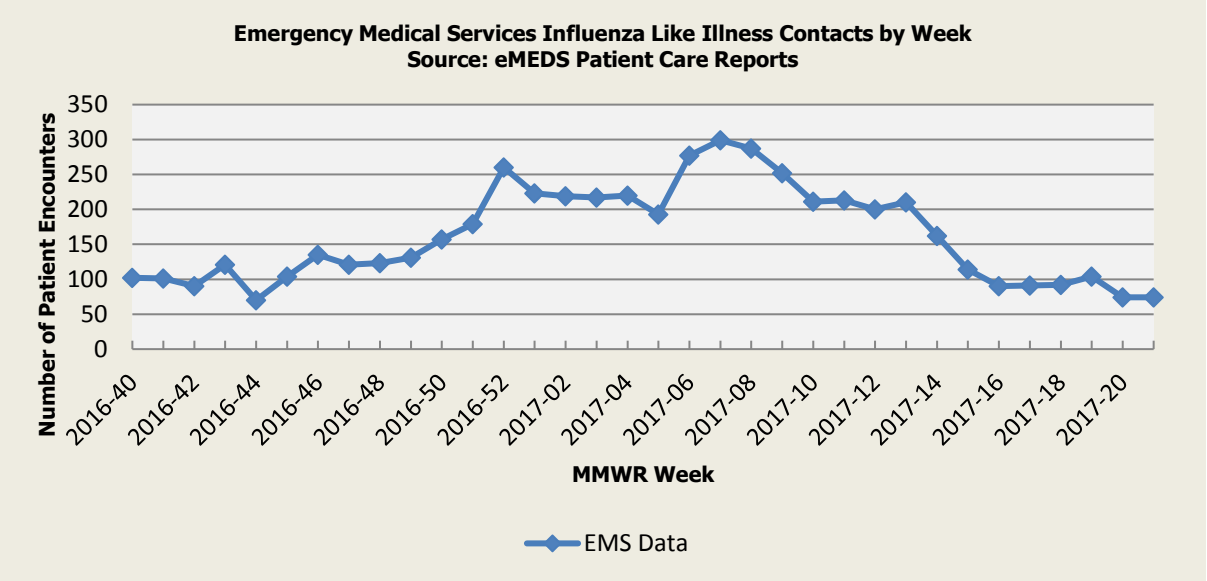
SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October through May).



	Influenza-like Illness Baseline Data Week 1 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	167.70	223.96	205.49	194.23	206.50
Median Rate*	7.66	9.63	9.05	8.51	9.00

* Per 100,000 Residents



Disclaimer on eMEDS flu related data: These data are based on EMS Pre-hospital care reports where the EMS provider has selected "flu like illness" as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

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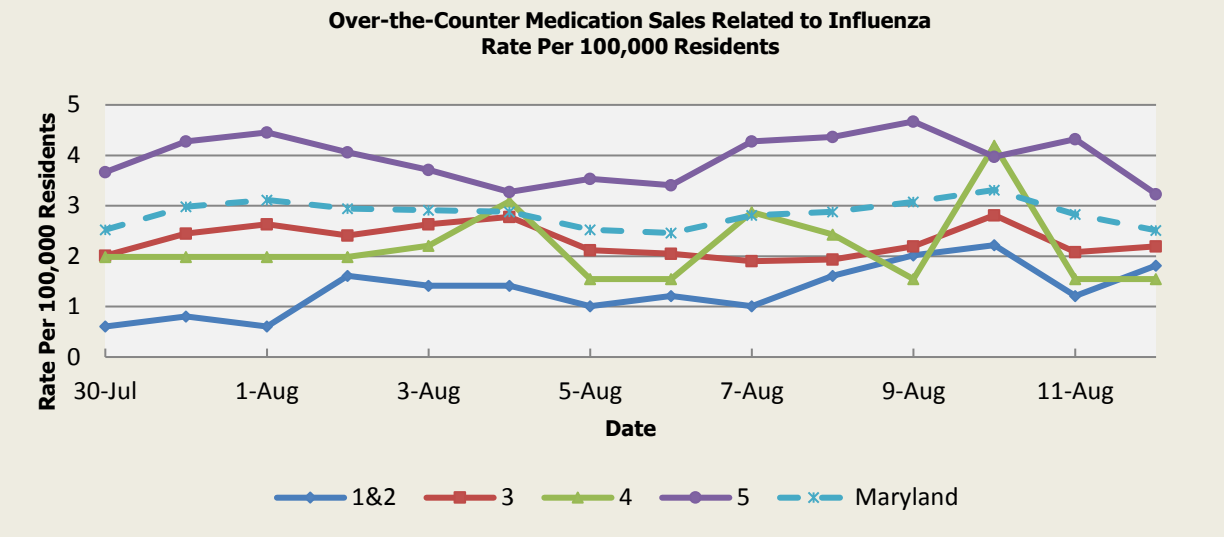
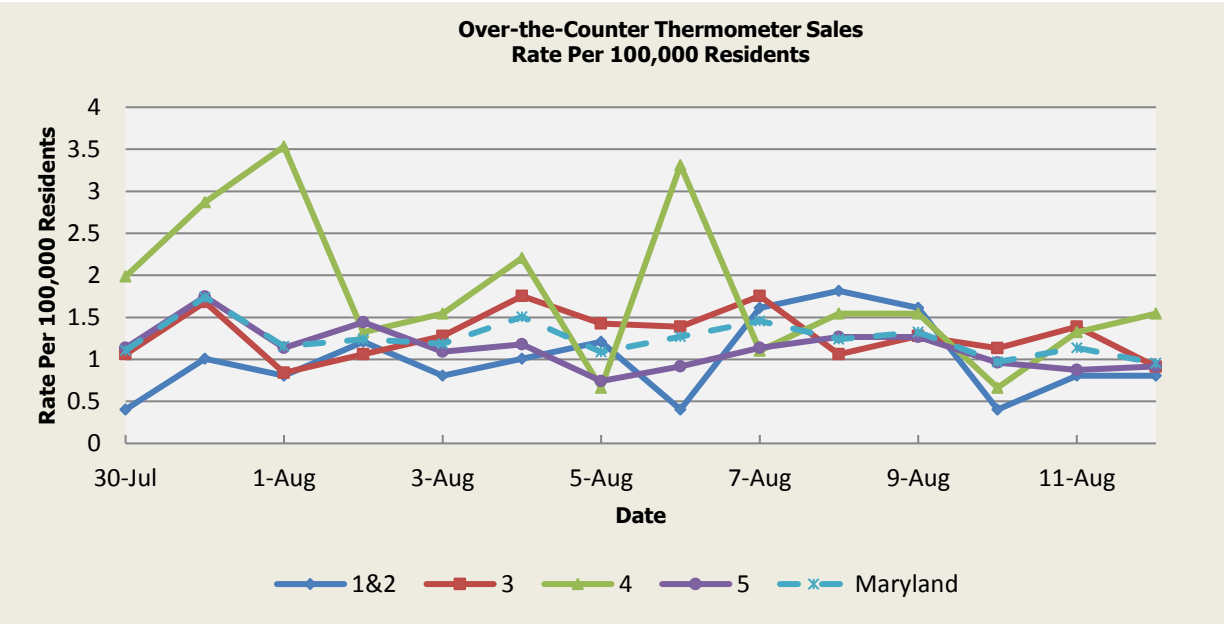


There was not an appreciable increase above baseline in the rate of OTC medication sales during this reporting period.

	OTC Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.63	4.72	2.63	8.13	5.78
Median Rate*	3.23	4.38	2.43	8.03	5.52

* Per 100,000 Residents



There was not an appreciable increase above baseline in the rate of OTC thermometer sales during this reporting period.

	Thermometer Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.24	3.11	2.40	4.16	3.47
Median Rate*	3.02	3.03	2.43	4.06	3.36

* Per 100,000 Residents

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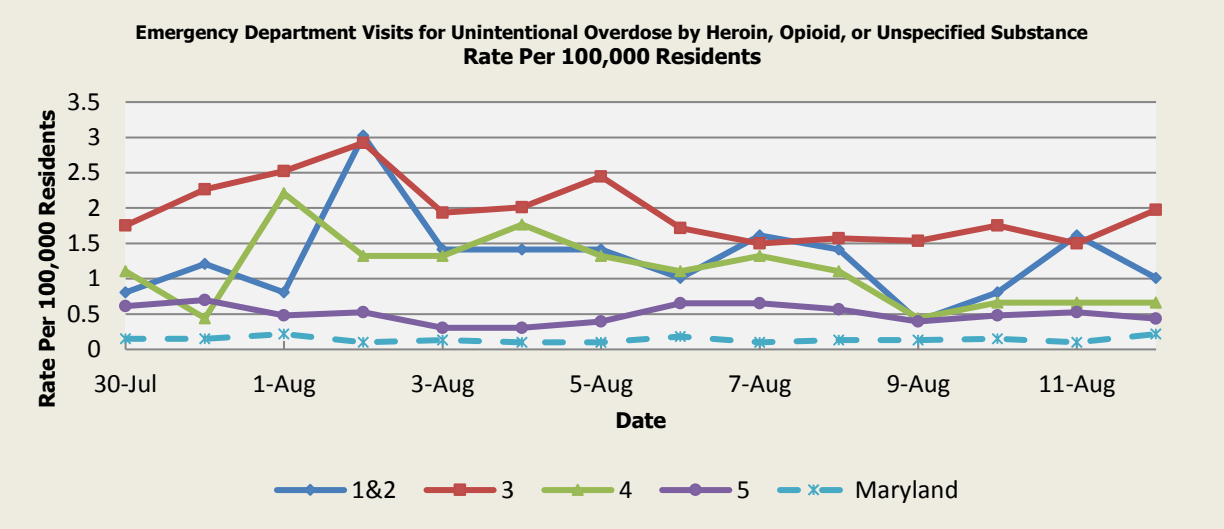
SYNDROMIC OVERDOSE SURVEILLANCE

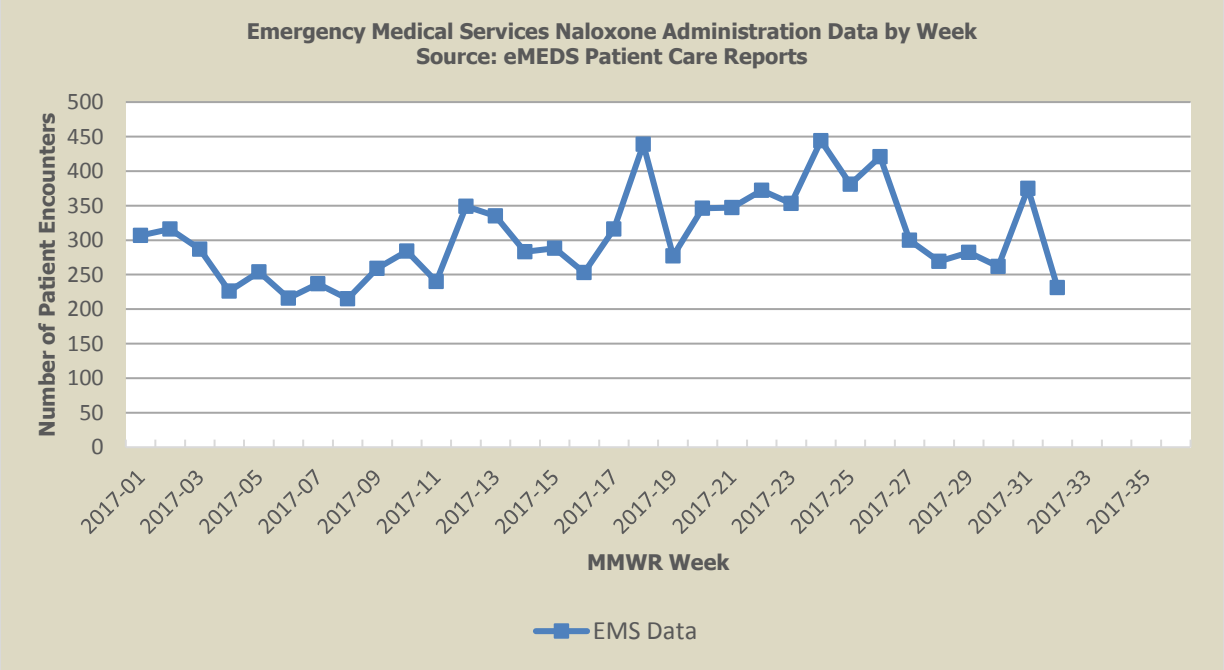
The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that the majority of fatal overdoses are Opioid-related.



Disclaimer on ESSENCE Overdose related data: ESSENCE chief complaint and discharge diagnosis query for overdose-related illness includes but is not limited to the following terms: heroin, opioid, speedball, dope, fentanyl, naloxone, narcan, and overdose.

	Non-fatal Overdose ED Visit Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.31	0.40	0.36	0.14	0.29
Median Rate*	1.01	1.32	1.10	0.48	0.99

* Per 100,000 Residents



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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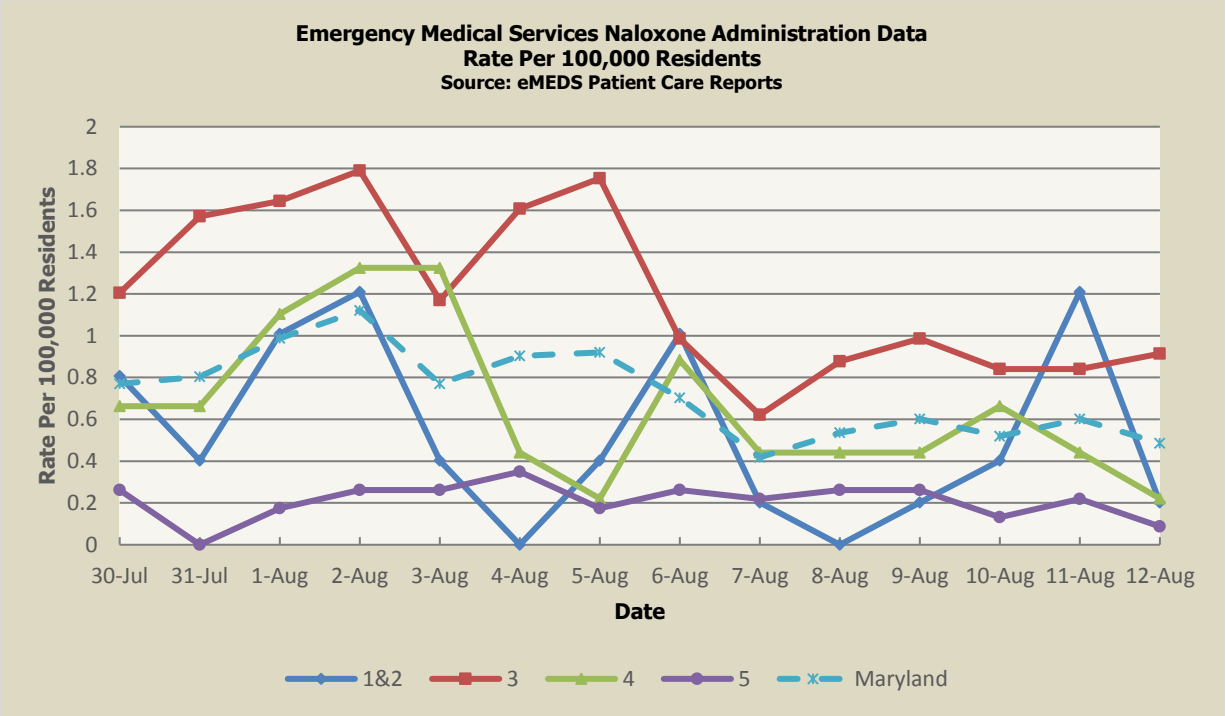

Disclaimer on eMEDS Naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

	EMS Naloxone Administration Data Baseline Data January 1, 2017 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.31	0.40	0.36	0.14	0.29
Median Rate*	1.01	1.32	1.10	0.48	0.99

* Per 100,000 Residents

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PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO update: The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

Alert phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of July 25, 2017, the WHO-confirmed global total (2003-2017) of human cases of H5N1 avian influenza virus infection stands at 859, of which 453 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

AVIAN INFLUENZA:

AVIAN INFLUENZA (PHILIPPINES), 11 Aug 2017, Highly pathogenic avian influenza. The source of the outbreak(s) or origin of infection is unknown or inconclusive. Read more: https://www.promedmail.org/post/5244529

H5N8 (SOUTH AFRICA), 15 Aug 2017, The department of agriculture, forestry and fisheries disclosed on Monday [14 Aug 2017] evening that another case of HPAI H5N8 had been detected in a commercial layer farm in the Steve Tshwete Local Municipality, on 7 Aug 2017. Control measures had been applied and all birds culled. It also revealed that the 1st cases of HPAI H5N8 in ostriches had been confirmed in 2 commercial ostrich farms in the Western Cape Province in the Hessequa Local Municipality on 9 Aug 2017. Read More: https://www.promedmail.org/post/5252092

H5N8 (SWITZERLAND), 16 Aug 2017, Two new cases of bird flu have been reported in western Switzerland, the Federal Food Safety and Veterinary Office (FSVO) said in a statement on Tuesday [15 Aug 2017]. Two swans were found dead on 10 Aug [2017] at Lake Neuchatel near Yverdon-les-Bains close to the French border. Tests showed they died of bird flu virus H5N8, the FSVO said, adding that it was still being determined whether there were other cases. Read More: https://www.promedmail.org/post/5255122

HUMAN AVIAN INFLUENZA:

H9N2 (CHINA), 12 Aug 2017, A 2-month old female child who lives in Guangdong province, China was confirmed positive for A(H9N2) influenza in June, according to the World Health Organization (WHO), becoming the 3rd case in China this year. She had onset of influenza-like illness (ILI) on 28 Apr 2017. The patient was hospitalized on 9 Jun 2017. A sample collected from the patient on 13 Jun 2017 as part of ILI surveillance was laboratory-confirmed as positive for A(H9N2) influenza virus. Read More: https://www.promedmail.org/post/5242688

NATIONAL DISEASE REPORTS:

E. Coli EHEC (COLORADO), 11 Aug 2017, Mesa County Public Health is investigating 8 confirmed cases of *E. coli* in the area, that they say may be associated with the Mesa County Fair. The health department says they work closely with the fair on preventative measures, such as hand washing stations and signs at the event. Health officials say it is not uncommon to see *E. coli* outbreaks

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surrounding a fair because of the animals there. Health officials say *E. coli* can have an incubation period of 10 days, and we now are past that threshold. Read More: https://www.promedmail.org/post/5243577

PLAGUE, ANIMAL (NEW MEXICO), 11 Aug 2017, An animal case of bubonic plague has been detected at the Quarai mission of Salinas Pueblo Missions National Monument in New Mexico. Monument staff discovered a dead rock squirrel in the square kiva at the mission on 11 Jul 2017. A veterinary diagnostic lab says the squirrel tested positive for plague. Authorities say bubonic plague can be fatal to humans, especially if not caught early enough. Read More: https://www.promedmail.org/post/5244152

SALMONELLOSIS (MULTI-STATE), 14 Aug 2017, Since the last update on 4 Aug 2017, 32 more ill people were added to this investigation from 15 states. As of 9 Aug 2017, 141 people infected with the outbreak strains of *Salmonella Kiambu* (51) or *Salmonella Thompson* (90) have been reported from 19 states. Read More: https://www.promedmail.org/post/5248901

PLAGUE (ARIZONA), 15 Aug 2017, Coconino County Public Health Services District (CCPHSD) officials confirmed that fleas collected in the Doney Park area, northeast of Flagstaff, have tested positive for plague *Yersinia pestis*. Last week, fleas collected in the Red Lake area, approximately 5 miles northeast of Williams, tested positive for plague. The tests were conducted by the Center for Pathogen and Microbiome Institute at Northern Arizona University. Read More: https://www.promedmail.org/post/5251542

BRUCELLOSIS (TEXAS), 15 Aug 2017, Raw milk is milk from cows or other animals that has not been pasteurized to kill harmful bacteria. This raw, unpasteurized milk can carry dangerous bacteria such as *Brucella, Listeria, Salmonella, E. coli, and Campylobacter*, which are responsible for causing numerous foodborne illnesses and outbreaks. Read More: https://www.promedmail.org/post/5251979

HEPATITIS A (CALIFORNIA), 15 Aug 2017, Since early 2017, the Public Health Services Division in the County of San Diego Health and Human Services Agency has been investigating a local hepatitis A outbreak. The outbreak investigation is ongoing. It has been challenging because of the long incubation period of the disease (15 to 50 days) and the difficulty experienced to contact many individuals sickened with the illness who are homeless and/or illicit drug users. To date, no common source of food, beverage, or other cause has been identified; as a result, the source of the outbreak remains undetermined. Read More: https://www.promedmail.org/post/5252338

VIBRIO VULNIFICUS (FLORIDA) 16 Aug 2017, Florida resident has contracted a rare-but-deadly bacterial infection, officials with the Florida Department of Health confirmed [Mon 14 Aug 2017]. The resident of Escambia county caught the extremely virulent *Vibrio vulnificus bacterium*, though officials have not said how. V. vulnificus is a found in salty, warm water and can enter the body through open wounds or from eating raw or undercooked shellfish. Read More: https://www.promedmail.org/post/5254135

WEST NILE (MICHIGAN, COLORADO), 16 Aug 2017, A horse in Greendale Township has been euthanized due to complications of West Nile. This is the 1st known positive WNV horse in Midland county," stated Midland County Mosquito Control (MCMC) Director Carl Doud. "The positive horse is an indication of human WNV risk as horses are a dead end host like humans. It is evidence that the virus has moved beyond the normal mosquito-bird-mosquito cycle. Read More: https://www.promedmail.org/post/5253833

INFANT BOTULISM (ARIZONA), 17 Aug 2017, A one-year-old boy is recovering at Banner Thunderbird Medical Center, after hospital officials said he contracted infant botulism over the weekend [12-13 Aug 2017]. According to a statement released by Banner Thunderbird Medical Center, infant botulism cases are rare, but potentially life-threatening. The illness affects only one to 2 infants in the county annually. Read More: https://www.promedmail.org/post/5257135

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INTERNATIONAL DISEASE REPORTS:

JAPANESE ENCEPHALITIS (CHINA), 11 Aug 2017, There are 176 cases of encephalitis in Hanoi, with 24 of these diagnosed as Japanese encephalitis. Typical encephalitis spreads via mosquito bite, with symptoms including headache, fever, aches in muscles or joints, fatigue, or weakness. The symptoms of the more serious Japanese encephalitis include fever, headache, vomiting, confusion, difficulty moving, swelling around the brain, and coma. Read More: https://www.promedmail.org/post/5242440

MERS-COV (SAUDI ARABIA), 11 Aug 2017, 1697 laboratory-confirmed cases of MERS-CoV infection, including 686 deaths [reported case fatality rate 40.4 per cent], 989 recoveries, and 22 currently active cases/infections. Read More: https://www.promedmail.org/post/5244266

ANTHRAX (ROMANIA), 11 Aug 2017, Two Romanians, husband and wife, were admitted to the Victor Babes Infectious Diseases Hospital in Craiova, after laboratory tests showed that they were infected with anthrax, local News.ro has reported. The 2 went to the Emergency County Hospital, Craiova on 4 Aug 2017 with several hand injuries. They were admitted to the hospital, and tests later confirmed that both of them were infected with anthrax. It is believed that the 2 got sick after coming into contact with infected animals. Read More: https://www.promedmail.org/post/5244267

HEMORRHAGIC DISEASE (NIGERIA), 11 Aug 2017, There is confusion in Oro-Ago community, in the Ifelodun Local Government Area of Kwara State, as leaders and members say no fewer than 70 persons have died of a strange illness. They told one of our correspondents that the illness was predominant among the Fulani settlers called the Bororos in the community. It was gathered that a large number of the Bororos had died since the outbreak of the strange illness on 23 Jul 2017. Those affected by the illness would first vomit blood and some black substances. Read More: https://www.promedmail.org/post/5244725

JAPANESE ENCEPHALITIS (INDIA), 11 Aug 2017, In the past few weeks, 7 persons have died in Manipur due to Japanese encephalitis, a mosquito-borne disease, said T. Kamini, a biologist at the state unit of the National Vector Borne Disease Control Programme on Thursday. He said that 83 others are currently undergoing treatment in hospitals. Read More: https://www.promedmail.org/post/5244526

CRIMEAN-CONGO HEMORRHAGIC FEVER (NAMIBIA), 12 Aug 2017, One person has died of Congo fever in Namibia bringing the number of people to die from the disease this year [2017] to 2, the country's ministry of health and social services has reported. Health ministry acting Permanent Secretary Bertha Katjivena announced at a press conference Thursday that the deceased, aged 63, died on 9 Aug 2017 after he had been admitted at Windhoek Central Hospital on 7 Aug 2017. Read More: https://www.promedmail.org/post/5244149

WEST NILE VIRUS (GREECE), 12 Aug 2017, The Greek Center for Disease Control and Prevention has registered 20 cases of West Nile fever in the country since the beginning of this year [2017]. Two deaths were reported, Nova TV reported. At present, the dangerous virus is observed only in the Peloponnese area of Argolida. In 12 of the cases, the disease occurred with complications in the central nervous system, including encephalitis, meningitis and paresis. Experts cannot confidently predict the dynamics of virus spreading. Read More: https://www.promedmail.org/post/5244148

CYCLOSPORIASIS – (UK, MEXICO), 14 Aug 2017, Over the summers of 2015 and 2016, the United Kingdom (UK) reported outbreaks of the intestinal disease cyclosporiasis in travellers returning from Mexico, mainly from the Riviera Maya and Cancun regions. As the source of the outbreaks was not identified, there is the potential for a similar outbreak to reoccur. As of 27 Jul 2017, 78 cases had already been reported in the UK in 2017, of which 37 (47%) had travelled to Mexico; 20 were awaiting travel history; 14 had travelled to 9 other overseas destinations, and 7 reported no overseas travel. Read More: https://www.promedmail.org/post/5249389

ANTHRAX (INDIA), 15 Aug 2017, The state animal husbandry department is probing a suspected anthrax outbreak in North 24 Parganas' Habra-II block after 22 buffaloes died in Guma Ghoshpara in the last one week. North 24 Parganas district veterinary officer Gautam Kumar Nandi on [Mon 14 Aug

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2017] led a team of veterinary experts to the affected zone to not only collect blood samples of the affected cattle but also apply anti-anthrax vaccine as a precautionary measure. Locals, who fear a possible human infection, are also panicked. Read More: https://www.promedmail.org/post/5251824

HANTAVIRUS (PANAMA), 16 Aug 2017, Health authorities in Los Santos province reported this [Tue 15 Aug 2017] that 2 children have been diagnosed with hantavirus. One case was notified in the Los Santos district, and the most recent one a 7-year-old child from the Bebederos neighborhood of Tonosi, who remains hospitalized and under observation in the Las Tablas Hospital. Read More: https://www.promedmail.org/post/5254838

BRUCELLOSIS (ALGERIA), 17 Aug 2017, No less than 70 cases of human brucellosis have been recorded during the 1st half of 2017 in the province of El-Oued. Of the total number of cases recorded, 60 percent were diagnosed in 4 communes (El-M'ghair, Reguiba, Oum-Toyour and Still) considered as foci of this disease, due to high amount of livestock, goats and cattle in particular. Read More: https://www.promedmail.org/post/5256690

LASSA FEVER (NIGERIA), 17 Aug 2017, Up to 12 suspected cases of Lassa fever were reported from four LGAs in week 30, 2017 compared with 14 suspected cases with 2 Laboratory confirmed cases reported from 3 LGAs (3 States) at the same period in 2016. Read More: https://www.promedmail.org/post/5256998

JAPANESE ENCEPHALITIS (INDIA), 17 Aug 2017, Based on a study carried out in 2015, a team led by Dr Manoj V Murhekar, Director of the Chennai-based National Institute of Epidemiology, found scrub typhus to be responsible for acute encephalitis syndrome (AES) in 63 percent of patients admitted to the Baba Raghav Das Medical College Hospital in Gorakhpur. Read More: https://www.promedmail.org/post/5255252

OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: http://preparedness.health.maryland.gov/ or follow us on Facebook at www.facebook.com/MarylandOPR.

More data and information on influenza can be found on the MDH website: http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx

Please participate in the Maryland Resident Influenza Tracking System (MRITS): http://flusurvey.health.maryland.gov

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NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

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Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	(([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	Anthrax (inhalational) Tularemia Plague (pneumonic)
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

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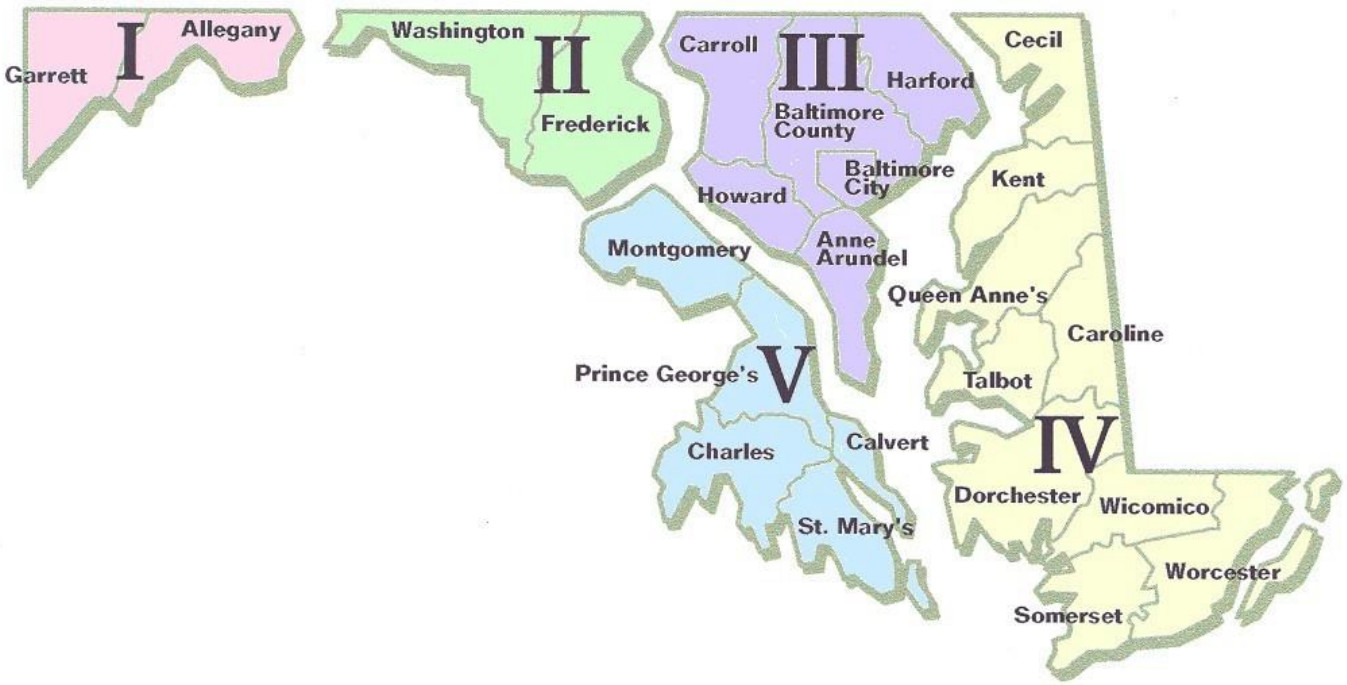
Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE
Regions 1 & 2	Allegany County Frederick County Garrett County Washington County
Region 3	Anne Arundel County Baltimore City Baltimore County Carroll County Harford County Howard County
Region 4	Caroline County Cecil County Dorchester County Kent County Queen Anne's County Somerset County Talbot County Wicomico County Worcester County
Region 5	Calvert County Charles County Montgomery County Prince George's County St. Mary's County



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